

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000084516

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: OPTIONS OPEN, LLC

**Current Principal Place of Business:**

3029 N. ROOSEVELT BLVD., #4  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

3029 N. ROOSEVELT BLVD., #4  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 26-0902868

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GANISTER, PATRICIA G  
3029 N. ROOSEVELT BLVD., #4  
KEY WEST, FL 33040 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GANISTER, PATRICIA G  
Address: 3029 N. ROOSEVELT BLVD., #4  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM ( ) Delete  
Name: APPLEBY, DELIA  
Address: 34 BAY DR.  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM ( ) Delete  
Name: STAFFORD, MARY  
Address: 352 BOCA CHICA RD.  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: STAFFORD, MARY  
Address: 354 BOCA CHICA RD.  
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARY STAFFORD

MGRM

04/23/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date